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CONFIRMATION NO. 1299

SERIAL NUMBER 10/826,627	FILING OR 371(c) DATE 04/16/2004 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. TIMBERLAKE/AQTRITION	
APPLICANTS Teun Sleurink, Lahr, GERMANY; <i>WR</i>					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/25/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		STATE OR COUNTRY GERMANY	SHEETS DRAWING 0	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
ADDRESS 7723					
TITLE Method of feeding choline					
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		